



PHILIP L. BROWNING
Director

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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August 26, 2015

To: Supervisor Michael D. Antonovich, Mayor
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Supervisor Sheila Kuehl
Supervisor Don Knabe

From: Philip L. Browning
Director

EGGLESTON YOUTH CENTERS FOSTER FAMILY AGENCY FISCAL ASSESSMENT AND CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a fiscal compliance assessment and contract compliance review of Eggleston Youth Centers Foster Family Agency (the FFA) in August 2014. The FFA has two offices located in the First and Second Supervisorial Districts, which provides services to DCFS foster children. According to the FFA's Program Statement, its mission is "to provide optimal quality, culturally relevant assessment, treatment, placement, and post-placement services to children and their families under interim supervision by DCFS."

At the time of the review, the FFA supervised 109 DCFS placed children in 43 Certified Foster Homes (CFHs). The FFA also serves Non-Minor Dependents (NMDs) ages 18 to 21. The placed children's average length of placement was 14 months and their average age was 12.

SUMMARY

CAD conducted a fiscal compliance assessment, which included an on-site review of the FFA's financial records such as financial statements, bank statements, check register, and personnel files to determine the FFA's compliance with the terms, conditions, and requirements of the Contract, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable federal, State, and County regulations and guidelines.

The FFA was in full compliance with 3 of 5 areas of the fiscal compliance assessment: Loans, Advances and Investments; Board of Directors and Business Influence; and Payroll and Personnel.

CAD noted deficiencies in the following areas: Financial Overview, related to a Semi-Annual Expenditure Report not being submitted on time; Cash/Expenditures, related to inadequate supporting documentation for check expenditures and bank reconciliations not being resolved timely.

During CAD's contract compliance review, the interviewed children generally reported feeling safe in the FFA certified homes; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity. The certified foster parents reported that they were supported by the FFA staff in their efforts to provide care, supervision and service delivery to the children placed in their homes.

The FFA was in full compliance with 8 of 11 areas of our contract compliance review: Certified Foster Homes; Facility and Environment; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

CAD noted deficiencies in the following areas: Licensure/Contract Requirements, related to Special Incident Reports (SIRs) that were not submitted timely nor cross-reported to all required parties per SIR reporting guidelines, and Community Care Licensing (CCL) cited the FFA for deficiencies and findings; Maintenance of Required Documentation and Service Delivery, related to one child not participating in the development of an updated Needs and Services Plan (NSP); and Personal Rights and Social/Emotional Well-Being, related to two CFHs not providing opportunities for the placed children to participate in extra-curricular, enrichment, and/or social activities.

Attached are the details of our review.

REVIEW OF REPORT

On September 24, 2014, Christina S. Lee, DCFS CAD Monitor, held an Exit Conference with the FFA's representatives: Clarence Brown, Executive Director; Cassandra Gibson-Judkins, Assistant Executive Director; Doris Vega, FFA Director; James Amakye, Accounting Director; and Nelia Arzate, Human Resources Coordinator. DCFS staff included Luis Moreno, CAD Financial Specialist; and Kristine Kropke-Gay, Out-of-Home Care Management Division (OHCMD). The FFA representatives were in agreement with the review findings and recommendations; were receptive to implementing systemic changes to improve compliance with regulatory standards; and to address the noted deficiencies in Corrective Action Plans (CAPs).

A copy of this report has been sent to the Auditor-Controller and CCL.

The FFA provided the attached approved Fiscal and Compliance CAPs addressing the recommendations noted in this compliance report.

On September 30, 2014, OHCMD provided the FFA with technical assistance to assist them in implementing recommendations noted in this report. CAD conducted a follow-up visit to the FFA on March 26, 2015, to verify implementation of the CAP.

If you have any questions, your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:EM
LTI:cl

Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Clarence Brown, Executive Director, Eggleston Youth Centers
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

**EGGLESTON YOUTH CENTERS FOSTER FAMILY AGENCY
FISCAL ASSESSMENT REVIEW
FISCAL YEAR 2014-2015**

SCOPE OF REVIEW

The fiscal compliance assessment included review of the Eggleston Youth Centers' financial records for the period of January 1, 2013 through August 31, 2014. Contracts Administration Division (CAD) reviewed the financial statements, bank statements, check register, and personnel files to determine the FFA's compliance with the terms, conditions, and requirements of the Foster Family Agency and Group Home Contracts, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable Federal, State, and County regulations and guidelines.

The on-site Fiscal Assessment review focused on five key areas of internal controls:

- Financial Overview,
- Loans, Advances and Investments,
- Board of Directors and Business Influence,
- Cash/Expenditures, and
- Payroll and Personnel.

Eggleston Youth Centers was in full compliance with 3 of 5 areas of the Fiscal Assessment: Loans, Advances and Investments; Board of Directors and Business Influence; and Payroll and Personnel.

FISCAL COMPLIANCE

CAD found the following areas out of compliance:

Financial Overview

- The Semi-Annual Expenditure Report was not submitted timely. The report was due on March 1, 2014, but was not submitted until April 9, 2014.

Recommendation:

The FFA management shall ensure that:

1. The Semi-Annual Expenditure Reports are submitted timely.

Cash/Expenditures

- Inadequately supported check expenditure disbursements were noted. Two non-payroll checks paid to the FFA's employees for the children's food, recreation, and supplies did not have original receipts. There were copies of receipts and the total amount on the receipt copies did not match the amount paid to the employee. There was no documentation as to why the amount paid was less than the amount on the receipt. Further, bank reconciliations were not resolved within six months. The FFA's bank reconciliations for March, April, and May 2014 showed outstanding items for longer than six months.

Recommendation:

The FFA management shall ensure that:

2. All expenditures are supported by the required documentation and bank reconciliations are timely resolved.

NEXT FISCAL ASSESSMENT

The next Fiscal Compliance Assessment of the FFA will be conducted in Fiscal Year 2015-2016.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of the FFA has not been posted by the Auditor-Controller.

**EGGLESTON YOUTH CENTERS FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY**

**3701 Stocker Street, Suite 200
Los Angeles, CA 90008
License Number: 197805862**

**13001 Ramona Boulevard, Suite E
Irwindale, CA 91706
License Number: 197804012**

	Contract Compliance Monitoring Review	Findings: August 2014
I	<p><u>Licensure/Contract Requirements</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Timely, Cross-Reported SIRs 3. Runaway Procedures in Accordance with the Contract 4. Are there CCL Citations/OHCMD Safety Reports 5. If applicable, FFA ensures Complete Required Whole Foster Family Home (WFFH) Training 6. FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments 7. FFA conducts an Assessment of CFP Prior to Placement of Two (2) or more children 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Improvement Needed 5. Not Applicable 6. Not Applicable 7. Full Compliance
II	<p><u>Certified Foster Homes</u> (12 Elements)</p> <ol style="list-style-type: none"> 1. Home Study and Safety Inspection Conducted Prior to Certification 2. The Agency's Inquiry with OHCMD for Historical Information Prior to Certification 3. Timely Criminal Clearances (DOJ, FBI, CACI) prior to Certification 4. Timely, Completed, Signed Criminal Background Statement 5. Health Screening & TB Test Prior to Certification 6. All Required Training Prior to Certification 7. Certificate of Approval on File/Including Capacity 8. Safety Inspection Completed At Least Every Six Months or Per-Approved Program Statement 9. Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates 10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers 11. Criminal Clearances and Health Screening/CDL/CPR/DOJ/FBI/CACI/AUTO Insurance for Other Adults in the Home 12. FFA Assists CFPs in Providing Transportation Needs 	<p>Full Compliance (All)</p>

III	<p><u>Facility and Environment</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. Exterior/Grounds Well Maintained 2. Common Areas Well Maintained 3. Children's Bedrooms/Interior Well Maintained 4. Sufficient and Appropriate Educational Resources 5. Adequate Perishable and Non-Perishable Foods 6. CFPs Conducted Disaster Drills and Documentation Maintained 7. Money and Clothing Allowance Logs Maintained 	Full Compliance (All)
IV	<p><u>Maintenance of Required Documentation and Service Delivery</u> (10 Elements)</p> <ol style="list-style-type: none"> 1. FFA Obtains or Documents Efforts to Obtain County Children's Social Worker's (CSW) Authorization to Implement NSPs 2. CFPs Participated in Development of the NSPs 3. Children Progressing Toward Meeting NSP Goals 4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with Child's Participation 5. FFA Social Workers Develop Timely, Comprehensive Updated NSP with Child's Participation 6. Therapeutic Services Received 7. Recommended Assessment/Evaluations Implemented 8. CSW Monthly Contacts Documented in Child's Case File 9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports 10. FFA Social Workers Conduct Required Visits 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance
V	<p><u>Educational and Workforce Readiness</u> (5 Elements)</p> <ol style="list-style-type: none"> 1. Children Enrolled in School Within Three School Days 2. Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals 3. Current Children's Report Cards/Progress Reports Maintained 4. Children's Academic Performance and/or Attendance Increased 5. FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs 	Full Compliance (All)

VI	<u>Health and Medical Needs</u> (4 Elements) <ol style="list-style-type: none"> 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely 	Full Compliance (All)
VII	<u>Psychotropic Medication</u> (2 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	Full Compliance (All)
VIII	<u>Personal Rights and Social/Emotional Well-Being</u> (10 Elements) <ol style="list-style-type: none"> 1. Children Informed of Agency's Policies and Procedures 2. Children Feel Safe in the CFP Home 3. CFPs Efforts to Provide Nutritious Meals and Snacks 4. CFPs Treat Children with Respect and Dignity 5. Children Allowed Private Visits, Calls and to Receive Correspondence 6. Children Free to Attend or Not Attend Religious Services/Activities of Their Choices 7. Children's Chores Reasonable 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right Refuse or Receive Medical, Dental and Psychiatric Care 10. Children Given Opportunities to Participate in Extra-Curricular Activities, Enrichment and Social Activities 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Improvement Needed
IX	<u>Personal Needs/Survival and Economic Well-Being</u> (7 Elements) <ol style="list-style-type: none"> 1. Clothing Allowance Provided in Accordance with FFA Program Statement 2. On-going Clothing Inventories of Adequate Quantity and Quality 3. Children's Involvement in Selection of Their Clothing 4. Provision of Sufficient Supply of Clean Towels Personal Care Items Meeting Ethnic Needs	Full Compliance (All)

	<ul style="list-style-type: none"> 5. Minimum Weekly Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement and Assistance with Life Book or Photo Album 	
X	<p><u>Discharged Children</u> (3 Elements)</p> <ul style="list-style-type: none"> 1. Completed Discharge Summary 2. Attempts to Stabilize Children's Placement 3. Child Completed High School (if applicable) 	Full Compliance (All)
XI	<p><u>Personnel Records</u> (9 Elements)</p> <ul style="list-style-type: none"> 1. Criminal Clearances (DOJ, FBI, and CACI) Signed and Submitted Timely 2. Timely, Completed, Signed Criminal Background Statement 3. FFA Social Workers Met Education/Experience Requirements 4. Timely Employee Health Screening/TB Clearances 5. Valid CDL and Auto Insurance 6. FFA Employees Signed Copies of FFA Policies and Procedures 7. FFA Employees Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers Caseloads Not to Exceed Total of 15 Children 	Full Compliance (All)

**EGGLESTON YOUTH CENTERS FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2014-2015**

SCOPE OF REVIEW

The following report is based on a “point in time” review. This compliance report addresses findings noted during the August 2014 review. The purpose of this review was to assess Eggleston Youth Centers Foster Family Agency’s (the FFA’s) compliance with its County contract and State regulations and included a review of the FFA’s program statement, as well as internal administrative policies and procedures. The monitoring review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Educational and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, 12 placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services they received. Additionally, four discharged children’s files were reviewed to assess the FFA’s compliance with permanency efforts. At the time of the review, one placed child was prescribed psychotropic medication. The child’s case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed five Certified Foster Home (CFH) files and five staff files for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with five Certified Foster Parents (CFPs) to assess the quality of care and supervision provided to the children.

CONTRACTUAL COMPLIANCE

CAD found the following areas out of compliance:

Licensure/Contract Requirements

- Special Incident Reports (SIRs) were not submitted timely or cross-reported.

A review of 19 SIRs revealed that seven were not submitted into the I-Track system in a timely manner. Additionally, five SIRs were not cross-reported to Out-of-Home Care Management Division (OHCMD), Community Care Licensing (CCL) or the Department of Children and Family (DCFS) Children’s Social Workers (CSWs) per SIR reporting guidelines. It was further noted that two SIRs were not reported to the FFA by the CFP in a timely manner.

- CCL cited the FFA as a result of deficiencies and findings.

CCL cited the FFA as a result of deficiencies and findings in a complaint received on January 2, 2014. According to the report dated April 24, 2014, CCL substantiated a complaint against a CFP for holding the hands of a seven year-old child to prevent him from hitting other children placed in the home. CCL requested a Plan of Correction (POC), which required the FFA to provide the CFP with training on personal rights. The POC was cleared on May 21, 2014. A referral was generated and investigated by a DCFS Emergency Response Children Social Worker (ER CSW) that determined that the allegations of Physical Abuse, General Neglect and Sibling at Risk to be inconclusive. The referral was brought to the attention of the Out-of-Home Care Investigations Section (OHCIS) on April 29, 2015. The completion of the investigation by OHCIS is pending.

CCL cited the FFA as a result of deficiencies and findings in a complaint received on January 10, 2014. According to the report dated April 24, 2014, CCL substantiated a complaint against another CFP when it was discovered that the CFP told the children in the home to hold the hands of a three year-old child if he tried to touch them. CCL requested a POC, which included the FFA providing the CFP with Personal Rights training to ensure all placed children are free from physical abuse as well as any personal rights violations. The POC was cleared on May 21, 2014. This referral was investigated by a DCFS ER CSW that determined that the allegations of Physical Abuse, General Neglect and At Risk Sibling Abuse to be unfounded. OHCIS conducted a supplementary investigation and determined that corrective actions were necessary. A Corrective Action Plan requiring a capacity reduction and requiring the FFA to ensure that the CFP utilizes approved babysitters and respite care was approved by OHCIS on April 28, 2014.

CCL cited the FFA as result of deficiencies and findings in a complaint received on January 14, 2014. According to the report dated May 23, 2014, CCL cited the FFA when it was determined that a CFP failed to report an incident of horseplay involving a thirteen year-old child. CCL requested a POC, which included that the FFA will provide training to the CFP on SIR reporting guidelines. The POC was cleared by CCL on June 9, 2014. The referral was investigated by a DCFS ER CSW that determined the allegations of General Neglect to be unfounded. OHCIS also investigated this referral and on September 23, 2014, determined that no further corrective action was warranted, as the CCL POC requiring retraining in the areas of "Foster Parent Responsibilities" and "SIRs and Reportable Incidents" had already been successfully completed by the CFPs.

CCL cited the FFA as a result of deficiencies and findings during the investigation of a complaint received on February 11, 2014. According to the report dated May 19, 2014, CCL substantiated a personal rights violation when it was determined that there was drug paraphernalia found in a CFH. CCL requested a POC, which included decertification of the home. The FFA decertified the home and the POC was cleared on April 28, 2014. The referral was investigated by DCFS ER CSW and the allegation of General Neglect was substantiated, which resulted in all of the placed children being removed from the home. OHCIS also investigated this referral and placed this CFH on an indefinite hold and it will no longer be used as a placement resource for DCFS children.

Recommendations:

The FFA management shall ensure that:

1. All SIRs are submitted timely and cross-reported to all required parties as per SIR reporting guidelines.
2. The FFA is in compliance with Title 22 regulations and free of CCL citations.

Maintenance of Required Documentation and Service Delivery

- The FFA Social Workers (SW) did not develop updated Needs and Services Plans (NSPs) with the child's participation.

Although the updated NSPs reviewed were timely and comprehensive, one child reported that her updated NSP did not include the goals that she identified with the FFA SW and that she would like the opportunity to participate in developing her NSP goals.

During the Exit Conference, CAD reiterated to the FFA representatives the importance of having children participate in the development of their NSP goals. The FFA representatives stated that they would ensure the children participate in the development and identification of their goals.

CAD conducted a follow up visit to the FFA on March 26, 2015, and reviewed the FFAs most recent updated NSPs. The reviewed updated NSPs contained children's signatures to show that the FFA ensured that children participated in developing their updated NSP goals.

Recommendations:

The FFA management shall ensure that:

3. FFA SWs develop updated NSPs with the child's participation.

Personal Needs/Survival and Economic Well-Being

- Children were not given the opportunities to participate in extra-curricular, enrichment, and social activities.

Two children stated that they were not given the opportunity to participate in extra-curricular, enrichment and/or social activities. One child requested to go to a Chinese Restaurant and was told, no. Further, the placed child was informed by the FFA SW that they are not allowed to go on outings because it was, dangerous. Another placed child had an interest in playing soccer or basketball, but was not given the opportunity to do so.

During the Exit Conference, the FFA representatives stated that the FFA values and encourages extra-curricular activities and affirmed that they will make efforts to provide all placed children with opportunities to participate in them.

On March 26, 2015, CAD made a follow-up visit to the FFA and reviewed three activity logs to verify the implementation of the FFA's actions in regards to the noted findings. During the follow up visit, it was noted that sampled activity logs verified that children are now participating in extra-curricular activities.

Recommendations:

The FFA management shall ensure that:

4. Children are given the opportunities to participate in extra-curricular, enrichment, and social activities.

PRIOR YEAR FOLLOW-UP FROM DCFS OUT-OF-HOME CARE MANAGEMENT DIVISION'S (OHCMD'S) FFA CONTRACT COMPLIANCE MONITORING REVIEW

The OHCMD's last Compliance Report, dated January 29, 2014, identified one recommendation:

Results:

Based on the results of the current review, this recommendation was not implemented.

- All FFA FHs are in compliance with Title 22 regulations and DCFS requirements.
5. The outstanding recommendation from the 2013-2014 report dated January 29, 2014, which is noted in this monitoring report as recommendation 2 is fully implemented.

At the Exit Conference, the FFA representatives stated their desire to remain in compliance with all Title 22 Regulations and Contract requirements and reiterated that the FFA will implement procedures to strive towards greater compliance.

CAD conducted an on-site follow-up visit on March 26, 2015. Based on our follow-up visit, it was noted that the FFA had implemented all four recommendations noted in this report. The FFA is tracking SIRs for timely submission via I-Track system; cross reporting SIRs per SIR reporting guidelines; children are participating in the development of their updated NSP goals; and activity logs are being maintained to verify children are participating in extra-curricular activities. OHCMD will provide on-going technical assistance prior to the next monitoring review.

	<h2 style="text-align: center;">EGGLESTON FAMILY SERVICES</h2> <p style="text-align: center;"><i>A FOSTER FAMILY AGENCY</i></p>	
	<p style="text-align: center;"><input checked="" type="checkbox"/> LOS ANGELES 3701 Stocker Street Suite 200 Los Angeles, CA 90008 (323) 954-1464 ~ Fax (323) 954-9515</p>	<p style="text-align: center;"><input checked="" type="checkbox"/> IRWINDALE 13001 Ramona Blvd. Suite E Irwindale, CA 91706 (626) 480-8107 ~ Fax (626) 480-7688</p>
	<p style="text-align: center;">LICENSE # 197805862</p>	<p style="text-align: center;">LICENSE # 197804012</p>

7/09/2015

Christina Lee, Contract Compliance Administrator
Department of Children and Family Services
Contracts Administration Division (CAD)
3530 Wilshire Blvd.
Los Angeles, CA 90010

**RE: Corrective Action Plan
Compliance Review 2014**

Dear Ms. Lee:

In response to the 2014 Department of Children and Family Services, Contracts Administration Division (CAD) Compliance Review, Eggleston Family Services is submitting the following corrective action plan to address the issues found.

LICENSURE/CONTRACT REQUIREMENTS:

During the review, CAD noted deficiencies in the area of Licensure/Contract Requirements, related to Community Care Licensing Division (CCLD) citations and Special Incident Reports.

Eggleston Family Services FFA received 3 substantiated CCLD complaints for Personal Rights violations and 1 substantiated CCLD complaint for Failure to Report during the review period. Eggleston Family Services understands the importance of protecting the personal rights of our youth and ensuring that our Certified Foster Parents adhere to reporting requirements, thus to address the deficiencies noted by OHCMD, our Certified Foster Parents will receive 2 hours of training on Personal Rights and 2 hours of training on Special Incident Reporting Requirements. These trainings will be conducted by the FFA Director on 11/15/14 and 12/06/14. Further, effective 11/1/14, it will be new protocol that FFA Social Workers will conduct in-home Foster Parent SIR trainings on a quarterly basis.

Specific to the deficiency regarding Special Incident Reports (SIR), on 10/29/14, all FFA staff will receive SIR training conducted by the FFA Supervisor who recently attending the DCFS OHCMD SIR training on 7/11/2014. The SIR training materials provided at the DCFS OHCMD training will be used to train all FFA Staff. As reported above, effective 11/1/14, it will be new protocol that FFA Social Workers will conduct in-home Foster Parent SIR trainings on a quarterly basis. In addition, as previously mentioned, the FFA Director will be conducting a 2-hour training on Special Incident Reporting Requirements on 11/15/14.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

During the review, CAD noted a deficiency in the area of the development of the Needs and Service Plans (NSPs) with the participation of the developmentally age-appropriate child. It was noted that a youth did not agree with the NSP goals as the goal she identified with the FFA Social Worker was not included in the NSP.

Eggleston Family Services feels that it is necessary for an age-appropriate youth to be involved in the development of the NSP to ensure shared decision-making and a sense of ownership and commitment from the youth. It is protocol that prior to the NSP being finalized, the FFA Social Worker meets with the Certified Foster Parent and youth to ensure that their feedback and recommendations are taken into account when developing the NSP. Once finalized, the FFA Social Worker again meets with the Certified Foster Parent and youth to review the NSP, NSP goals, and all parties sign in agreement. To ensure adherence to this protocol, on 9/3/14 and 9/8/14, all FFA staff received an overview regarding the compliance findings, and NSP development protocol was stressed. Sign-in sheet and agenda is attached.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

During the review, CAD noted a deficiency in the area of age-appropriate extra-curricular, enrichment, and social activities. It was noted that 2 youths were not afforded the opportunity to participate in extra-curricular, enrichment, and social activities of their choice.

Eggleston Family Services understands the importance of youths participating in age-appropriate extra-curricular, enrichment, and social activities, as it is necessary for their social/emotional well-being. During each visit, the FFA Social Worker assesses a youth's involvement with age-appropriate extra-curricular, enrichment, and social activities and provides Foster Parents with appropriate assistance/resources to ensure that a child is participating in appropriate activities. Further, as an Agency, Eggleston Family Services provides various activities year-long that our families can participate in; most recently in 7/2014, Eggleston Family Services collaborated with Ramos Brothers Circus who hosted a circus event for the FFA's families and youths, and in 9/2014, Eggleston Family Services held their annual summer picnic. It is FFA policy that all youths must participate in extra-curricular, enrichment, and social activities of their choice. To ensure adherence to this, on 9/3/14 and 9/8/14, all FFA staff received an overview regarding the compliance findings, and this protocol was stressed. Attached please find the FFA's recently revised Case Activity Log where all recreation, cultural, enrichment, and mentoring activities the youths are participating in are documented for each visit (see section XIV). Further, trainings will be conducted by the FFA Director on 11/15/14 and 12/06/14 with all Certified Foster

Parents and the importance of age-appropriate extra-curricular, enrichment, and social activities will be further stressed with Certified Foster Parents.

Eggleston Family Services respectfully submits the above Corrective Action Plan to address the issues noted from the compliance review. We recognize that the above Corrective Action Plan will help to improve the services Eggleston Family Services provides to the children while in out-of-home care.

On behalf of Eggleston Family Services, I would like to thank DCFS Contracts Administration Division, specifically Christina Lee, Contract Compliance Administrator, for the review and feedback provided.

Should you have any questions or need further clarification, please do not hesitate to contact me at (323) 954-1464 or via email at dvega@egglestonfamilyservices.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'Doris Vega', with a stylized flourish at the end.

Doris Vega, MSW
Foster Family Agency Director

Cc: Clarence Brown, Executive Director
Cassandra Gibson-Judkins, Assistant Executive Director



EGGLESTON YOUTH CENTERS INC.,

Non-Profit Corporation

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Irwindale, CA 91706

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www.egglestonyouthcenter.org

EGGLESTON'S FISCAL CORRECTIVE ACTION PLAN TO ADDRESS THE DCFS REVIEW FINDINGS. (10/22/14)

Response to question No. 6

The agency will ensure that the Semi-Annual Expenditure report is submitted 60 days after the close of the six months period for the reporting period.

- A). January-June by August 31, of the same year.
- B) July- December by February 28 of the following year.

Response to question No. 22

All checks issued by the agency including those for allowances, recreation and supplies will be supported by original receipts. Receipts will be issued for left over funds when the funds are being accounted for by the Facility Staff to the accounting department. These funds will be deposited into the Agency's Banking account. The funds will be kept in a locked box at all times before being sent to the Bank for deposit. These funds will only be collected by someone other than the person in accounting who issued the checks.

Response to question No. 25

The agency will resolve reconciling items on timely basis.
Bank reconciliations will be prepared within 30 days of receiving the Bank Statements and reviewed and signed by management for appropriateness and accuracy. All checks outstanding and not cashed will not allowed to be on the books for a period exceeding 90 days. After the monthly Bank Statement reconciliations, all checks that are outstanding will be investigated.

These changes are being implemented with immediate effect.

The Accounting Manager-James Amakye will Supervise and implement these changes. Mr. Brown, the Executive Director and Cassandra Judkins, the Assistant Director will be monitoring.

There will be constant review of our accounting system to ensure that accounting best practices is being adopted and also in compliance with our DCFS Contract.